

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|----------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | BZ | TC 3-883 | 02-26-01 |
| RESPONSE FORMALITY REVIEW | HZ | 1712 | 09-08-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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